Form Approved OMB No. 3206-0219

OPTIONAL APPLICATION FOR FEDERAL EMPLOYMENT - OF 612

You may apply for most jobs with a resume, this form, or other written format. If your resume or application does not provide all the information requested on this form and in the job vacancy announcement, you may lose consideration for a job.

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|------------------------------------|--------------------------------|-------------------|----------------------------------|--|----------------------------------|--|
| Job title in announcement | 2 Grade(s) applying for | | | 3 Announcement number | | |
| Last name | First and middle names | | | 5 Social Security Number | | |
| Mailing address | į | | | 7 Phone numbers (include area code) Daytime | | |
| City | | State | ZIP Code | | Evening | |
| ORK EXPERIENCE | | i | i | | | |
| Describe your paid and non | paid work experience rela | ted to the job fo | r which you are | applying. Do not | t attach job descriptions. | |
| Job title (if Federal, include | series and grade) | | | | | |
| From (MM/YYYY) | To (MM/YYYY) | | Salary | per | Hours per week | |
| Employer's name and addre | ess | | | | Supervisor's name & phone number | |
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| Describe your duties and a | ccomplishments | | | | | |
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| From (MM/YYYY) | To (MM/YYYY) | | Salary | per | Hours per week | |
| Employer's name and addre | ess | | Supervisor's name & phone number | | | |
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| Describe your duties and a | ccomplishments | | | | 1 | |
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| 9 | 9 May we contact your current supervisor? YES [] NO [] ▶ | If we nee | ed to contact | your current supe | ervisor before m | aking a | n offer. we will co | ntact vou first. | | | |
|----|--|------------|--------------------------------|--|---|------------|----------------------------------|-------------------------------|--|--|--|
| | DUCATION Mark highest level completed. Some HS | | | | | | | octoral [] | | | |
| 11 | 1 Last high school (HS) or GED school. Give | e the sch | ool's name, | city State, ZIP Co | de (if known), a | nd year | diploma or GED | received. | | | |
| 12 | 2 Colleges and universities attended. Do no | t attach | a copy of you | ur transcript unles | s requested. | | | | | | |
| - | Name | | | | Total Credits Earned Maior(s) Degree - Year (if any) Received | | | | | | |
| 1) | 1) City S | State | ZIP Code | Semester | Quarter | | (II | any) Received | | | |
| 2) | 2) | | | | | | | | | | |
| , | | | | | | | | | | | |
| 2) | 3) | | | | | | | | | | |
| 3) | 3) | | | | | | | | | | |
| | typing speed, etc.). Job-related certificate (publications, memberships in professiona but do not send documents unless reques | ıl/honor s | enses (curre cocieties, lea | nt only). Job-rela dership activities, | ted honors, awa public speaking | ards, an | d special accomperformance award | lishments is). Give dates, | | | |
| GE | ENERAL | | | | | | | | | | |
| 14 | 4 Are you a U.S. citizen? YES | [] | ио[]► | Give the country | of your citizens | ship. | | | | | |
| 15 | Do you claim veterans' preference? NO [] YES [] ► Mark your claim of 5 or 10 points below. 5 pts [] ► Attach your DD 214 or other proof. 10 pts [] ► Attach Application for 10-Point Veterans' Preference (SF 15) & proof required. | | | | | | | | | | |
| 16 | 6 Were you ever a Federal civilian employee NO [| ?] YES | [] ► Fo | r highest civilian gra | | 1 | From (MM/YYYY) | | | | |
| 17 | 7 Are you eligible for reinstatement based or NO [| | | nditional Federal S requested, attach SF | | | | | | | |
| ΑP | PPLICANT CERTIFICATION | | | | | | | | | | |
| 18 | 8 I certify that, to the best of my knowledge and made in good faith. I understand that me or for firing me after I begin work, and investigated. | t false or | fraudulent ir | nformation on or a | ttached to this a | pplication | on may be ground | Is for not hiring | | | |

SIGNATURE

DATE SIGNED